BEST AVAILABLE COPY													
								Application			or Docket Number		
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999								09607827					
CLAIMS AS FILED - PART I' (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED NUMBER I			EXTRA	R	RATE .]	RATE	FEE	
BASIC FEE				٠.,٠	· .		•	345.00	OR		690.00		
TOTAL CLAIMS			3/ minus 20= • /			7	×	X\$ 9=		OR	X\$18=	148	
INDEPENDENT CLAIMS			2 minus 3 = - /				X39=			OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT											0.70		
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=		OR	+260=	270	
								TOTAL		OR	TOTAL	M	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL		
AMENDMENT A		REM	AIMS IAINING FTER NOMENT		HIGHEST REMUN PREVIOUSLY ROT DIAG	PRESENT EXTRA	R/	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		lb	Minus	·31	= \	X	9=		OR	X\$\18=		
	Independent	•	2	Minus	3	-	X:	19=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-1	30=		OR	+260=		
								OTAL		OB.	TOTAL	7	
6-28-04 (Column 1) (Column 2) (Column 3)								r. FEE			ADDIT. FEE		
AMENDMENT B	·	CL REM AI	AIMS IAINING FTER NOMENT	-	HIGHESY NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE-2		RATE	ADDI- TIONAL FEE	
	Total	. 1	6	Minus ·	. 3/	•	X	9=		OR	X\$18=		
	Independent			Minus	3	/	· X	9=/		OR	X78-		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								30=		OB∕	+260=		
								OTAL	-	20	TOTAL		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CL REM AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	••		XS	9=		OR	X\$18≖		
	Independent	•		Minus	•••	=	-	9=			X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+260=		
"If the entry in column 1 is less than the entry in column 2, write "U in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE													
					Independent) is the		r found in	the ap	propriate bo	ı in col	uma 1.	İ	

FORM PTO-475 (Rev. 12/99)